Employer Report - Part A The Labor-Management Reporting and Disclosure Act of 1959, As Amended (LMRDA)

U.S. Department of Labor Employment Standards Administration

Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210 (Rev. 1986)

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. Form approved - OMB No. 1215-0188 Expires 11-30-2002

File No.

(To be assigned by U.S. Dept. of Labor)

	le two copies. Refer to instructions on pa	age 3.					
	Full Name of Reporting Employer (including trade name, if any) and mailing address (Street Numbe City, State, ZIP Code). Cintas Corp. (Indiana facilities - Angola,		relating to	o fiscal per	0.1		
	Ft. Wayne, South Bend, Warsaw)	Beginning	Mo.	Day	Yr.	and	
_	6800 Cintas Blvd., PO Box 625737 <u>Cincinnati, OH 45262</u>	Ending	05 Mo.	31 Day	02 Yr.		
2. /	Address of Principal Office, if different from address in Item 1.						
			necessary	to vertify to make the contraction to the contracti	this repo		
3 /	Any other address or addresses at which records necessary to verify this report will be available for	XX Address	in Item 1				
	examination.	Address	in Item 2	2			
		Address	in Item 3		USA		
6. 1	Type of organization.	_		6	The CALL		
Ę	Corporation Partnership Individual Other (Specify)		TO TO THE STATE OF				
7. 1	Industrial Classification (Check appropriate box(es)):						
Ma		inance, Insuranc and Real Estate	e Ser	vices	Other (Specify		
	A B C D E FXX	G 🗆	Н		,	,,	
.!	READ CAREFULLY THE FOLLOWING QUESTIONS, TAKING INTO CONSIDERATION THE EXCLUSION INSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUESTIONS IS "YES," CHECK TION AND COMPLETE PART B, A COPY OF WHICH APPEARS ON THE REVERSE SIDE. COMPLETE A ANY OF THE QUESTIONS NUMBERED 8A THROUGH 8F. IF THE ANSWER IS "YES" TO MORE THA MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" A	THE BOX IMM SEPARATE PAI AN ONE PART (MEDIATELY RT B FOR OF THE S	Y FOLLOW! EACH "YE INGLE QUE	ING THE	QUES- ER TO	
-	QUESTION.—During the past fiscal year did you make or promise or agree to make, directly or indirectly, any payment or loan of money or other thing of value (including reimbursed expenses) to any labor organization or to any officer, agent, shop steward, or other representative or employee of any labor organization?						
8	No Yes. If "Yes," enter the number of Part B's required for this question		sed expe	nees) to a	ny of you	r em.	
٠	UESTION.—During the past fiscal year did you make, directly or indirectly, any payment (including reimbursed expenses) to any of your emoyees, or to any group or committee of your employees, or to any group or committee of your employees, or to any group or committee of your employees, or as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing without previously at the same time disclosing such payment to all such other employees? NO Yes. If "Yes," enter the number of Part B's required for this question						
(C. QUESTION.—During the past fiscal year did you make any expenditures where an object thereof, or coerce employees in the right to organize and bargain collectively through representatives of their No Yes. If "Yes," enter the number of Part B's required for this question	their own choosing?					
E	D. QUESTION.—During the past fiscal year did you make any expenditure where an object thereof, d cerning the activities of employees or of a labor organization in connection with a labor dispute in the labor of th	irectly or indirectly, was to obtain information con- which you were involved?					
E	QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor or organization pursuant to which such person undertook activities where an object thereof, directly or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively tyou make any payment (including reimbursed expenses) pursuant to such an agreement or arranger	ON.—During the past fiscal year did you make any agreement or arrangement with a labor relations consultant or other independent contractor nization pursuant to which such person undertook activities where an object thereof, directly or indirectly, was to persuade employees to exercise to exercise, or as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing; or did ke any payment (including reimbursed expenses) pursuant to such an agreement or arrangement?					
F	F. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor or organization pursuant to which such person undertook activities where an object thereof, directly concerning activities of employees or of a labor organization in connection with a labor dispute in ment pursuant to such agreement or arrangement?	y or indirectly,	was to ful	rnish you v	vith inform	nation	
	No Tyes," enter the number of Part B's required for this question				4		
	TOTAL NUMBER OF PART B'S	REQUIRED FOR	R THIS R	EPORT IS	1		

U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards

Refer to Instructions on Page 3



Name and Address of Reporting Employer

File No.	1E-4362
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(To be assigned by U.S. Dept. of Labor)

8 E Indicate in blocks a example on page 2	at left, question number to which this Part B relates ar , 3d paragraph under "What Must Be Filed.")	nd the consecutive number of this Part B with respect to that question. (See
9. PROVIDE THE FOLLOW	NG INFORMATION:	nt Both.
 Name and address of group or organization through whom a sepa made or to whom pa tures were made. 	on with whom or ployer (if an independent rate agreement was so state).	
CBC Consul 5900 Lorac Suite 101	ting, Ltd. Drive	
Clarkston,	MI 48346	
	greement or arrangement pursuant to which payment	s or expenditures were agreed to or made.
04-01	Oral Written	
Mo. Day		
 a. Date of each payment or expenditure 	b. Amount of each payment or expenditure	c. Kind of each payment or expenditure (Specify whether payment or loan, and whether in cash or property)
(1)	(1)	(1)
9-28-01	\$56,175.00	CHECK
(2)	(2)	(2)
(3)	(3)	(3)
,		*
12. Explain fully the circumst additional narrative sheet	ances of all payments, including the terms of any oral a ets that are necessary to fully explain the required inf	agreement or understanding pursuant to which they were made. Attach any formation.
For service	es rendered during the unio	un campaign to access
questions o	of employees in the voting	block concerning the
law pertain	ning to the employees right	S. employer's rights
and the rig	hts of the union.	s, employer b rights,
5 9		
	SIGNATURE AND N	'ERIFICATION
The above employer and report, including all documer correct, and complete.	I each of his undersigned duly authorized officers, dec nts referred to therein and attached hereto, has bee	lares, under the applicable penalties of law, that all of the information in this n examined by him and is, to the best of his knowledge and belief, true,
SIGNED	, PRESIDENT S	IGNED MU L. CARNALA, TREASURER
a Cissamili or	1. Jn 5-4-01 (If other title, cross out and write in correct title above.)	Concernate off on 5-4-01 (If other title, cross out and write in correct title above.)
NOTE.—Only one Part B of a with the report.	n LM-10 report need be signed and verified since the	Part B so executed will be deemed to cover and include all Part B's filed